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GAINESVILLE, FL 32614-2950 TEL: (352) 375-8100 FAX: (352) 372-5800					Linda Audette			(Depositor's name)	
					prodo (duttin			(Signature)	
				Į	October	22, 2	008	(Date)	
APPLICATION NO.	FILING DATE			FIRST NAMED INVENT	OR	ATTORNE	Y DOCKET NO.	CONFIRMATION NO.	
10/807,807	10/807,807 03/24/2004			Joseph S.M. Peiris	is UHK-107XC1T			4398	
TITLE OF INVENTION SYNDROME (SARS)	i: IIIGH-THROUGHPU	T DIAG	GNOSTIC ASS/	AY FOR THE HUMA	N VIRUS CAUSING	3 SEVERE	ACUTE RESPIR	ATORY	
APPLN, TYPE	SMALL ENTITY	ISSU	IE FEE DUE	PUBLICATION FEE DO	JE PREV. PAID ISSU	E FEE TO	OTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES		\$720 \$755	\$300	\$0		\$102 0 1055	11/10/2008	
EXAMINER		A	RT UNIT	CLASS-SUBCLASS					
HUMPHREY, LOUIS	E WANG ZHIYING	1648	435-006000						
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3. ASSIGNEE NAME AT									
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(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
The Universit	y of Hong Kon	g		Hong Kong,	China				
Please check the appropri	ate assignee category or	categorie	es (will not be pr	inted on the patent);	☐ Individual ☐ Co	orporation o	r other private grou	p entity Government	
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